



**CERTIFICATION OF  
COMPLETION LANDSCAPE  
INSTALLATION  
P-25(D)**

Development Services

**Planning Division**  
1635 Faraday Avenue  
(442) 339-2610  
www.carlsbadca.gov

Project Name: \_\_\_\_\_

Permit Address: \_\_\_\_\_

Permit Number: \_\_\_\_\_

Drawing Number: \_\_\_\_\_

***I certify that I have inspected the planting and irrigation system and that:***

- 1) All landscape work has been installed and completed per the plans and specifications approved by the City of Carlsbad;***
- 2) All required soil amendments were incorporated;***
- 3) The installed irrigation system is functioning as designed and approved;***
- 4) The irrigation control system was properly programmed in accordance with the irrigation schedule; and***
- 5) The person operating the system has received all required maintenance and irrigation plans.***

---

Project Landscape Architect or Professional of Record \_\_\_\_\_ Date \_\_\_\_\_

License Number and Expiration Date: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Following receipt of this Certification of Completion by the city, a final review of the installation will be performed by the city. You can fax the certification letter to **760-436-7327** or email the form to: **BP@DUGMOREDESIGNSTUDIO.COM**

Call the Landscape Inspection Request phone line at **760-436-7327** to schedule the inspection.

Inspection Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Contactor Firm Name: \_\_\_\_\_